

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Attorney Docket No.	7780/17 (T00343)
Application Number	09/932,842
Filing Date	AUGUST 17, 2001
First Named Inventor	WEIJING CHEN
Group Art Unit	2686
Examiner	PEACHES, RANDY

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Response	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings:	<input checked="" type="checkbox"/> <b>Reply Brief</b> (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Extension of Time Request (duplc)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Revive Application	<input type="checkbox"/>
<input type="checkbox"/> Information Disclosure Statement, PTO-1449, art	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	

## CALCULATION OF FEE

				Small Entity		Large Entity	
Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus		x \$25=	0	x \$50=	
Indep.		Minus		x \$100=	0	x \$200=	
First Presentation of Multiple Dep. Claim				+ \$180=	---	+ \$360=	
				total add'l fee	\$ 0	total add'l fee	\$ 0

## CERTIFICATE OF ELECTRONIC SUBMISSION

Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature	/FRANK C. NICHOLAS/	Date:	SEPTEMBER 8, 2006

## CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being submitted electronically to the U.S. Patent and Trademark Office on this date:		SEPTEMBER 8, 2006
Signature	/FRANK C. NICHOLAS/ FRANK C. NICHOLAS (33,983)	Date: SEPTEMBER 8, 2006